

Substitute for form 1449B/PTO				Complete If Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				<i>Application Number</i>	10/780,114
<i>(Use as many sheets as necessary)</i>				<i>Filing Date</i>	February 17, 2004
				<i>First Named Inventor</i>	Dow, Steven W.
				<i>Art Unit</i>	1633
				<i>Examiner Name</i>	A. Wehbe
Sheet	1	of	1	<i>Attorney Docket Number</i>	021819-000130US

NON PATENT LITERATURE DOCUMENTS				
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.		T ²
/AW/	BA	AUF, Gregor, et al. "Implication of Macrophages in Tumor Rejection Induced by CpG-oligodeoxynucleotides Without Antigen", <i>Clinical Cancer Research</i> (2001) 7:3540-3543		<input type="checkbox"/>
/AW/	BB	VOLLMER, Jörg, et al. "Oligodeoxynucleotides lacking CpG dinucleotides mediate Toll-like receptor 9 dependent T helper type 2 biased immune stimulation", <i>Immunology</i> (2004) 113:212-223		<input type="checkbox"/>
	BC			<input type="checkbox"/>
	BD			<input type="checkbox"/>
	BE			<input type="checkbox"/>
	BF			<input type="checkbox"/>
	BG			<input type="checkbox"/>
	BH			<input type="checkbox"/>
	BI			<input type="checkbox"/>
	BJ			<input type="checkbox"/>

Examiner Signature	/Anne Marie Wehbe/ (09/01/2007)	Date Considered	09/01/2007
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¹EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

²Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.